

FAQs – Affordable Care Act Summary of Benefits and Coverage and Glossary for FEHB

NOTE: The following FAQs come from questions that arose during a health carrier focus group regarding the ACA Summary of Benefits and Coverage (SBC) and Glossary of Health Coverage and Medical Terms (Uniform Glossary) for FEHB. For more information please review the final regulations published by the Department of the Treasury, the Department of Labor, and the Department of Health and Human Services (Departments) and the SBC and Glossary FAQs (FAQs set 8 and set 9). Those and other relevant documents are available at <http://cciio.cms.gov/resources/factsheets/index.html#aca>.

SBC Content & Structure

1. **Q:** Will the FEHB SBC template be the same as the SBC template used for private lines of business?

A: Yes, with some exceptions including:

1. The disclaimer on the 1st page of the FEHB SBC (and subsequent pages if the plan chooses to leave it on those pages) will read:

This is only a summary. Please read the FEHB Plan brochure ([insert brochure number]) that contains the complete terms of this plan. **All benefits are subject to the definitions, limitations, and exclusions set forth in the FEHB Plan brochure.** Benefits may vary if you have other coverage, such as Medicare. You can get the FEHB Plan brochure at [www.\[insert\]](http://www.[insert]) or by calling 1-800-[insert].

2. FEHB Program specific language for the “Why this Matters”, “Common Medical Event”, “Your Rights to Continue Coverage”, and “Your Appeal Rights” sections is provided.

2. **Q:** How will benefit information be displayed for Medicare members?

A: The FEHB SBC will not display separate benefit information for Medicare members. However, because Medicare can affect an enrollee’s benefits, OPM has added the following sentence into the disclaimer on the first page of the FEHB SBC: “Benefits may vary if you have other coverage such as Medicare.”

3. **Q:** Must the header and footer be repeated on every page of the SBC?

A: No. If a plan chooses, it may include the header only on the first page of the SBC. In addition, a plan may include the footer only on the first and last page of the SBC, instead

of on every page. The OMB control number that appears on the Departments' sample SBC template is not to be displayed on the SBC issued by the plan.

- 4. Q:** Are certain electronic features (such as scrolling and expansion of columns) permitted when displaying the SBC electronically?

A: Yes. Minor adjustments are permitted to accommodate the plan's information and electronic display method, such as expansion of columns. Additionally, it is permissible to display the SBC electronically on a single webpage, so the viewer can scroll through the information required to be in the SBC without having to advance through pages (as long as a printed version is available that meets the formatting requirements of the SBC). However, the deletion of columns or rows is not permitted when displaying a complete SBC.

(For more on minor adjustments, see FAQs set 8 at http://cciio.cms.gov/resources/factsheets/aca_implementation_faqs8.html)

- 5. Q:** Do the plans have the authority to modify the "Networks" column (i.e. "In-network Provider" and "Out-of-network provider")?

A: Yes.

- 6. Q:** Can a plan add premium information to the SBC form voluntarily?

A: While OPM understands that HHS allows plans to add premium information to the SBC, OPM will not allow premium information on FEHB plan SBCs so that plan SBCs are consistent in the FEHB Program.

- 7. Q:** Must plans stay within the 8-page limit?

A: Yes.

- 8. Q:** Regarding the excluded services section on page 4, should each plan pick the services to list on their own or will OPM provide guidance?

A: OPM will not provide guidance. Plans may use their discretion. Please note that wherever you have provided the required information in the SBC, you may add a reference to specified pages or portions of the brochure in order to supplement or elaborate on that information. Please see the Sample Completed SBC and Instructions for Completing the SBC- Group Health Plan Coverage issued by the Departments for more information.

9. Q: Has OPM considered changing the language in the plan brochure template for 2013 so that the terms in the brochure are identical to those in the SBC and Uniform Glossary?

A: OPM has already submitted changes for the 2013 plan brochure that came from Federal employees and carriers. OPM will consider changing the language in the brochure for 2014.

Glossary of Health Coverage and Medical Terms

10. Q: Will the Glossary of Health Coverage and Medical Terms (Glossary) be the same for FEHB as is it for private lines of business?

A: Yes.

11. Q: Will OPM require plans to distribute the Glossary with the SBC?

A: OPM will require plans to comply with the distribution rules required by the final regulations. The regulations require plans to make the Uniform Glossary available upon request and to include an internet address in the SBC where an individual may review the Uniform Glossary.

Distribution

12. Q: How and when must a plan provide an SBC to an enrollee, potential enrollee, or family member?

A: For the FEHB Program:

1. Each plan must post its SBC on its website in a location that is prominent and readily accessible by September 28, 2012.

2. Each plan may additionally post a downloadable copy of its SBC, so long as the format of any downloadable SBC is readily accessible (such as in an html, MS Word, or pdf format).

3. Each plan must provide its SBC in paper form, free of charge, upon request. The SBC must be provided within 7 days of the request.

13. Q: Must plans mail the SBC with the plan brochure?

A: No, plans should follow the requirements for distribution as described in question 12.

14. Q: How and when must a plan provide notice that an SBC is available?

A: Each plan must provide SBC notice language, set forth below, to each enrollee at least 30 days in advance of the calendar plan year. The SBC notice language may be communicated in paper or by email.

The language will provide:

- notice to the plan's FEHB enrollees that the SBC for the plan, and for all FEHB plans, is available,
- the internet address where the plan's SBC is available,
- information on how to request a paper copy of the plan's SBC, free of charge, and
- notice that OPM's website provides information on how to obtain SBCs for all FEHB plans.

The following ACA Notice of Summary of Benefits and Coverage (SBC): Availability of Summary Health Information, must be communicated in paper form or by email at least 30 days in advance of the start of the calendar plan year:

Notice of Summary of Benefits and Coverage (SBC): Availability of Summary Health Information

The Federal Employees Health Benefits (FEHB) Program offers numerous health benefits plans and coverage options. Choosing a health plan and coverage option is an important decision. To help you make an informed choice, each FEHB plan makes available a Summary of Benefits and Coverage (SBC) about each of its health coverage options, online and in paper. The SBC summarizes important information in a standard format to help you compare plans and options.

This plan's SBC is available on the internet at: www.XXXX.com/SBC. A paper copy is also available, free of charge, by calling 1-XXX-XXX-XXXX (a toll-free number).

To find out more information about plans available under the FEHB Program, including SBCs for other FEHB plans, please visit www.opm.gov/insure.

15. Q: May a FEHB plan provide the SBC notice language in its open season mailing or new enrollee packet?

A: Plans may include the SBC notice language in any communication reasonably calculated to result in actual receipt by all enrollees in the plan, as of at least 30 days in advance of the calendar plan year. Plans may not rely on internet website posting alone.

16. Q: Are plans required to provide the SBC and Glossary for health fairs?

A: Plans may use their discretion as to whether or not they want to have SBCs and/or the Uniform Glossary available at health fairs.

Translations

17. Q: The regulations state that in order to satisfy the requirement to provide the SBC in a culturally and linguistically appropriate manner, a plan should follow the rules in the claims and appeals regulations under PHS Act section 2719. Does this mean that the SBC must include a sentence on the availability of language assistance services?

A: Yes, if the notice is sent to an address in a county in which ten percent or more of the population is literate only in a non-English language. The final SBC regulations provide that a plan is considered to provide the SBC in a culturally and linguistically appropriate manner if the thresholds and standards of the claims and appeals regulations are met. The claims and appeals regulations outline three requirements that must be satisfied for notices sent to an address in a county in which ten percent or more of the population is literate only in a non-English language. In such cases, the plan is generally required to provide oral language services in the non-English language, provide notices upon request in the non-English language, and include in all English versions of the notices a statement in the non-English language clearly indicating how to access the language services provided by the plan.

Accordingly, plans must include, in the English versions of SBCs sent to an address in a county in which ten percent or more of the population is literate only in a non-English language, a statement prominently displayed in the applicable non-English language clearly indicating how to access the language services provided by the plan. In this circumstance, the plan must include this statement on the page of the SBC with the "Your Rights to Continue Coverage" and "Your Appeal Rights" sections.

Sample language for this statement is available on the model notice of adverse benefit determination at http://cciio.cms.gov/resources/files/abd_model_notice_2.pdf. Current county-by-county data can be accessed at <http://www.cciio.cms.gov/resources/factsheets/clas-data.html>.

Even in counties where no non-English language meets the ten percent threshold, a plan can voluntarily include such a statement in the SBC in any non-English language. Moreover, nothing in the SBC regulations limits an individual's rights to meaningful

access protections under other applicable Federal or State law, including Title VI of the Civil Rights Act of 1964.

18. Q: Are FEHB plans required to provide written translations in Spanish, Chinese, Tagalog, and Navajo?

A: Yes, the same as plans for private lines of business.

19. Q: If OPM changes the template, will each plan be responsible for written translations of those changes?

A: Yes, plans will be responsible for providing accurate written translations of SBCs beyond what is available from the Departments at <http://cciio.cms.gov/resources/other/index.html#sbcug>.

508 Compliance

20. Q: Are FEHB plans required to issue 508 compliant SBCs?

A: OPM will provide a 508 compliant template, and we strongly encourage plans to post 508 compliant versions of the SBC and Uniform Glossary on the plan websites. However, the Departments' regulations do not require plans to provide a 508 compliant SBC or Uniform Glossary.

